State Charities Aid Association



THE TRAINING

ATTENDANTS FOR THE INSANE

FEBRUARY, 1885

PRICE 15 CENTS

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6 EAST FOURTEENTH STREET







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THE TRAINING

OF

ATTENDANTS FOR THE INSANE.*

During the last fifty years great progress has been made in the treatment of insanity. At the beginning of this century, lunatics were generally regarded as dangerous wild beasts, to be caged, chained, and cowed into submission, for the protection of society; they are now considered as sick people, to be cured if possible, and to receive, during the continuance of their malady, every practicable alleviation of their sufferings. In pursuance of this object there has been, in all the best-managed asylums, a gradual substitution of personal attendance and attention for mechanical methods; and the patients now enjoy a degree of freedom (notably in some of the Scotch asylums) which would formerly have been thought incompatible with safety.

The new system evidently demands of the attendants, both men and women, to whom the immediate care of the insane is intrusted, qualifications much higher than were formerly thought necessary. And the difficulty of procuring and retaining persons fit to fulfil the onerous duties of such a position is probably the gravest of all those with which the superintendents of insane asylums have to contend. The ordinary asylum attendant of the old school regards the

^{*} While this paper was in preparation, letters of inquiry were sent to several asylum superintendents, both in this country and Great Britain; and the answers to these letters furnished a part of the material used.

patients merely as *inmates* and himself as a *keeper*; his highest ideal is the preservation of order; of curative measures, of the study of the individual peculiarities of the patients, of intelligent effort to meet the ever-varying needs of each case, he has not the remotest conception. Intentional brutality and neglect are probably rare (although the study of lunacy reports shows that they are by no means unknown)

but ignorance is lamentably common.*

"It evidently requires," says the New York State Commissioner in Lunacy (Tenth Annual Report, for 1882), "a far higher order of mental and moral discipline, greater selfcontrol and peculiar personal presence and influence, to manage a ward of insane, than a ward of merely sick persons;" and in the report of the following year, he says, "The want of proper supervision of the insane in county institutions is too often conspicuous in the want of qualified attendants." "One of the great difficulties," says Dr. J. C. Shaw, of the Kings County Asylum, "especially with old attendants who have been brought up in asylums, is . . . to make them understand not to interfere with the patients unnecessarily; for instance, take a comparatively quiet ward, as you go through you will find the attendants making the patients all sit down in rows against the wall." "There are many difficulties and trials in the way of getting, instructing, and retaining attendants," says another superintendent, "which can only be appreciated by those having the responsibility of the care of the insane." The New York Assembly Committee of Investigation into the State Asylum at Utica (1883), after commenting upon the abuses of which it had obtained evidence, says: "Among the principal causes of the evil are the low pay, long hours, and insufficient training of attendants." Physicians in Massachusetts testify to the existence there of

^{*} The superintendent of one of the best known training-schools for nurses in this country objects to receive for training women who have been employed in insane asylums, because, as she says, they have a wrong idea of the relation between nurse and patient; their manner to sick people is always rough and dictatorial.

the same want. "The chief difficulty," says one, "lies with the male attendants, who are seldom willing to devote themselves long to the care of the insane; four or five months is the average term of service among male attendants in the Boston Lunatic Hospital and other Asylums in the State."* The Special Commission appointed in 1882 by the Governor of Pennsylvania to examine into the management of the insane, stated in its report, "The great desideratum for hospitals for the insane is a corps of trained nurses and attendants."

From the other side of the Atlantic there comes much similar testimony. In the Thirty-sixth Annual Report of the English Commissioners in Lunacy (1882) we read: "As a rule . . . in county and borough asylums the proportion of attendants to patients is sufficiently large, but there is room, speaking generally, for much improvement in their training and qualifications." Frequent changes among the attendants are noticed: a large proportion—in some asylums over half of them—had been on duty for less than twelve months. From this same report it appears that there were in the English asylums, during the year 1881, twenty-three suicides, almost every one of which was attributable to carelessness in the attendants.

In the Twenty-fifth Annual Report of the Commissioners in Lunacy for Scotland (1883) we find: "The whole number of changes among attendants during 1882 was 500, . . . and we regard it as unfavorable to the interests of the patients that they should be so numerous." The assigned causes of change were: Left voluntarily, 340; on account of ill health, 22; absconded, 4; dismissed for drunkenness, incompetence, carelessness, or other misconduct, 120; died; the services of 10 were no longer required. The number of lunatics in the several classes of asylums in Scotland on January 1, 1883, was 8,431; the average proportion

^{*} Boston Medical and Surgical Journal, July, 1883.

of attendants is about one to ten or twelve patients. Hence it appears that considerably more than half the entire number of asylum attendants had been changed within the year. In 1881 the proportion of changes was even larger.

In a paper upon* "Getting, Training, and Retaining the Services of Good Asylum Attendants," Dr. Clouston, Superintendent of the Royal Edinburgh Asylum, says that the average period of service in the British asylums is less than two years; and that the almost unanimous testimony of asylum superintendents is that the raw material, out of which they endeavor to make attendants on the insane, is most difficult to get good. "Which of us," he continues, "would not feel a burden lifted off us, . . . if we could think our patients were all under the care of experienced. intelligent, and trustworthy attendants?" In his annual report for 1881 the same authority says: "The feeling, above all others, I would like to instil into our attendants, is that feeling of professional interest in their work and pride in it which a doctor has and which an educated trained nurse has." Again, he says that the first and most important reform in asylums to which he looks forward is, "that the attendants will be better and more systematically trained, that more intelligent classes will take to this work, and that it will become a life-work for more persons."

Moreover, the refined and educated among the insane themselves testify to the irritation and depression arising from enforced intercourse with ignorant and coarse attendants, who exercise authority over them. Dr. Stephen Smith‡ cites several cases of patients who, both before and after recovery, expressed an urgent desire for the presence in the wards of a kind, well-mannered, and intelligent companion. And he recommends that such "companions"

^{*} Journal of Mental Science, October, 1876. Reprinted in Appendix, by permission of the author.

[†] Annual Report of the Royal Edinburgh Asylum, 1882.

[†] Tenth Annual Report of the New York State Commissioner in Lunacy.

should be provided in addition to the ward attendants, because, "with rare exceptions, the attendant and patient are not on such terms as would lead to the kind of confidence of the latter in the former essential to success; . . . nor do the attendants have the requisite time for such extra duties." And of attendants as they are now this is doubtless true.

As to the causes of the difficulty of obtaining good attendants, all authorities are substantially agreed. The work of asylum attendants is hard and distasteful, the hours are long, the pay is low, the confinement irksome: men and women of the requisite qualifications—especially men—can earn higher wages elsewhere at more agreeable tasks. The annual reports of the English Commissioners in Lunacy are full of remarks upon these points. To take one example from many, they say * of a certain asylum: "The lowness of the wages on entry may be the cause why attendants of the proper sort are not obtained; and none can be long retained if their comforts and relaxation are but indifferently considered. It is very essential that an esprit de corps should be created in the asylum, and that every encouragement should be given to social amusements among the attendants. . . Their hours of attendance are . . . from 6 A.M. till 9 P.M. in summer, and only one hour shorter in winter. . . . The attendants' only break in the day seems to be half an hour for dinner, their other meals being taken in the wards." The superintendent of another English asylum attributes the difficulty of getting suitable persons as attendants chiefly to the length of time during which they are on duty.

The Commissioners in Lunacy for Scotland say: † "We think it deserving of careful consideration by the administrators of those institutions where changes occur frequently,

^{*} Annual Report for 1882.

whether some addition to the wages or some increase of the comforts of attendants is not desirable;" and they repeat this recommendation in the following year.*

In the Tenth Annual Report of the New York State Commissioners in Lunacy we read of one asylum: "There cannot . . . be a very high order of attendants in this asylum until the superintendent is more immediately responsible for their appointment and discharge, and a higher grade of wages is paid." The superintendent of another asylum writes: "In my opinion, asylum attendants are the worst paid and the best abused class of persons in the public service of the State. . . . Better pay, shorter hours, and less restrictions than are now generally allowed attendants in this country would doubtless improve the quality of the service, and also diminish the number and frequency of

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Wages on entrance.

For men: £20 to £32 (about $100 to $160)

For women: £13 to £16 (about $65 to $80)

Maximum after prolonged service.

For men: £25 to £45 (about $125 to $225)

For women: £18 to £32 (about $90 to $160)
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Beside wages, board, and lodging, most asylums furnish their attendants with a uniform; and in a few localities the married attendants have the privilege of sleeping out of the asylum and receive a small allowance in lieu of lodging.

In first-class private asylums, male attendants receive £30 per annum (about \$150), which is increased by £5 yearly up to £50 (\$250).

The proportion of day attendants in the county and borough asylums is usually about one to eleven patients. In the work-houses, the lunatic wards of which are supposed to receive only harmless chronic cases, the paid attendants are fewer, and are assisted by paupers.

The Scotch lunacy reports give no information in regard to the wages actually paid. In the well-known Barony Parochial Asylum, at Lenzie, the wages in 1881 were as follows:

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Ordinary male attendants .....£30 to £36 (about $150 to $180) per annum.

Ordinary female attendants ...... 84 (about $420)

Head male attendants ...... 55 ( "275)
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In many English and Scotch Asylums, faithful service for a certain term of years is rewarded by a pension.

^{*} The English lunary reports do not always give the rate of wages paid. Attendants enter the English asylums at a minimum which varies in different localities, and their wages are raised with length of service, usually by £1 or £2 yearly, to a maximum which also varies. So far as can be ascertained, the wages per annum in English county and borough asylums range as follows:

changes among that class of help." * The laborious nature of their work may be judged from the rules of one asylum.† For every ten or twelve patients there is one attendant; their service begins at 5 A.M. in summer, at 5.30 A.M. in winter, and continues till 10 P.M. the year round. They must see to the personal neatness of the patients, must wait upon them at meal-times, and must perform all necessary services for them; they must keep the wards, corridors, etc., in order; sweep, clean, make beds, and polish floors; they are strictly forbidden to use any violence or rudeness to the patients, no matter what the provocation; and whatever they may be doing, they are enjoined to constant watchfulness. They are allowed board, washing, and wages which begin at \$18 a month, and are increased, by \$2 every six months, to \$25 a month, which is the maximum. They have a yearly holiday of one week, and three hours—from 7 to 10 P.M.—on every alternate day; at all other times they must be in the asylum. It is not surprising that out of a staff of from twelve to fifteen attendants in this asylum, eight

^{*} The grading of the service differs somewhat in the several State asylums of New York—in all of them the attendants' wages are advanced with length of service. So far as can be learned, the monthly wages in the different classes of asylums range as follows:

,	State Asylums.		County Asylums,	Private Asylums.
	Upon entrance.	Maximum.		
Male attendants Female attendants Male supervisors Female supervisors	10 to 12	\$25 to \$30 16 to 18 30 to 40 20 to 30	\$14 to \$35 8 to 20	\$18 to \$40 10 to 20

[&]quot;Supervisors" have the oversight of several wards. Night attendants and those in charge of "refractory" wards usually receive a slight increase of wages. In the State asylums, the number of patients to each attendant varies from five to thirteen. In private asylums the work of the attendants seems to be less heavy, as many patients have special attendants.

[†] State Asylum for Insane Criminals, Auburn, N. Y. The rules in force in the other State asylums are not, so far as known, essentially different.

had been changed within eight months*—of whom three resigned, and five were dismissed for incompetence or misconduct.

The rules drawn up by the New York State Board of Charities for the government of county asylums order that a chief male and a chief female attendant shall be appointed in each asylum, and that there shall be one attendant for every twenty patients, no pauper to be appointed to such a situation. The actual number of patients to each attendant in these asylums varies from five to thirty-five.† In some of them there are, properly speaking, no attendants, and the lunatics are locked into their wards for a great part of the day, while the supposed attendant is absent on other duties. Paupers are employed as assistants in some of the county asylums; in some of them there are no night-watchers, the only provision for the night being that the attendants sleep within hearing of the patients. The restraint rather than the cure of lunatics seems to be the object of most of these asylums. A constant visitor to one of them describes the attendants as "of a low class, without training, with little or no education, and no idea of, nor desire for, the improvement of the mental condition of the inmates." And who that has once seen it can forget the dreary aspect of a ward in such an institution—the listless inmates sitting unemployed "in rows against the wall," the locked doors, the jingling keys, the mechanical routine, the vigilant attendant quickly repressing every movement, lest it should induce excitement? Who can look upon such places as in any sense hospitals for the cure of insanity?

We have seen what the attendants of the insane are today: what are they to be hereafter?

It is but a few years since the service of our hospitals

^{*} See Twenty-fourth Annual Report of the Superintendent for the year ending September 30, 1883.

[†] Eleventh Annual Report of the New York State Commissioner in Lunacy.

was in very much the same condition as that of the asylums now is. Not to revert to the time when Mrs. Gamp and Betsy Prig were the familiar types of professional nurses, we need only go back to the year 1873 to find the nurses and "orderlies" (male nurses for the men's wards) in Bellevue Hospital, New York, of a class very little above the workhouse "helpers" who scrubbed the wards. Indeed, it sometimes happened that a ward was left for several days without any other attendant than the "helper." The nurses, even when willing and experienced, were underpaid and overworked; there was nothing to tempt a man or a woman, who could obtain any other situation, to remain in the hospital; and the standard of nursing was necessarily very low. A nurse or orderly who kept the ward clean and the beds neat, whose patients had their faces washed and their hair smooth, and who gave the prescribed medicines regularly, was "an excellent nurse;" the condition of the patients under the bad nurses we need not now recall. In a greater or less degree, most other hospitals suffered from the same evil; trained and intelligent nursing was, except among religious sisterhoods, almost unknown in America. There were, indeed, two small training-schools for nurses in Philadelphia; one connected with the Lying-in Charity, giving special instruction in that branch of nursing; the other in the Woman's Hospital, which admitted its first pupil in 1863, and in 1874 had graduated in all fifty nurses; but these schools were too small, perhaps also too special, to exercise much influence upon the general standard of nursing.

In May, 1873,* the Bellevue Training-school for Nurses was opened, in the face of much opposition from the medical authorities, and much doubt as to its practical working even among those who were inclined to be friendly to it.

^{*}The "New York State School for Training Nurses" attached to the Brooklyn Maternity was founded simultaneously; it was incorporated in March, 1873, and received its first pupils in June of that year. The school at Bellevue was not incorporated until 1874.

The school began on a small scale, with thirteen nurses and "probationers," in five female wards of the hospital; as it has trained nurses capable of taking charge of other wards, it has been gradually extended, and up to January 1, 1885. has graduated two hundred and twenty-five nurses. In the same year, 1873, training-schools were founded in New Haven and in Boston, and others have since then been established in different parts of the country—many of them under the supervision of nurses trained at Bellevue. It is not too much to say that these schools have revolutionized the whole practice of nursing; and even those who originally opposed their establishment now acknowledge their usefulness. Operations are performed and feats of nursing accomplished which under the old system (or rather no-system), were not even thought of. The hospitals derive great benefit from the presence of the schools; and the graduates find constant employment in private families, at twenty or twenty-five dollars a week. Indeed the supply of graduated nurses by no means equals the demand which has arisen since physicians and their patients have learned the comfort and the advantage of trained and skilful nursing. Much doubtless remains to be done; there are still hospital wards and poor-house infirmaries under the care of ignorant, incompetent, irresponsible persons. But it has been proved that a better method is practicable, and its universal adoption is only a question of time.

Is not the extension of the benefits of this reform to the vast mass of sufferers from insanity also only a question of time? Already some steps have been taken in the right direction. About twelve years ago the English Commissioners in Lunacy established in London a registry for the names of all asylum attendants; superintendents of asylums are required to notify the register within three days of the engagement or discharge of an attendant, with reasons for the same. Some years later, a "Handbook for Attendants

on the Insane" was published in London by Dr. L. S. Forbes Winslow, setting forth their duties and rights under the law, and giving general directions as to their conduct. No recognized system of training, however, appears to exist in England.

In 1876,* Dr. Clouston, of the Edinburgh Asylum, in the paper already quoted, advocated the regular training of asylum attendants, by lectures and ward teaching, with a system of diplomas, promotions, and pensions. His views excited discussion, but apparently bore no immediate fruit. About three years ago a new female infirmary was added to the Edinburgh Asylum, and placed under the care of a staff of trained hospital nurses. From that time forward, all the female attendants who had entered the service of this asylum have passed through a short period of training in this infirmary under the head nurse; "that they may begin their work," says Dr. Clouston, "by learning to nurse the sick, and to look on all mentally affected persons as really sick."

Very nearly at the same date, one of Dr. Clouston's assistants, Dr. A. Campbell Clark, became the superintendent of the then newly opened Glasgow District Asylum at Bothwell. An unusual number of female patients suffering from acute physical disease were received into the asylum, and a trained hospital nurse was procured for their benefit. It soon became evident to Dr. Clark that the conversation and the example of this trained nurse had roused a spirit of emulation among the ward attendants, who began to notice symptoms and to discuss cases. Upon this hint, he instituted a course of lectures, attendance upon which was not, however, compulsory; he supplemented the lectures by ward teaching, and encouraged the attendants to make brief notes of the cases committed to their charge. Not infrequently, they

^{*} Many years before this, Dr. Browne, of the Crichton Royal Institution for the Insane, had given lectures to his attendants, and Dr. MacIntosh, of Gartnavel, had instructed his attendants to take notes of cases, etc. In this, as in many other matters of lunacy reform, the Scotch asylums have taken the lead.

thus called his attention to symptoms which had escaped him. The course was followed by an examination, in which the women did better than the men. The results of the experiment encouraged Dr. Clark to continue it in the following years; and in a paper * read before the Medico-Psychological Association of Great Britain in November, 1883, he related what he had done and urged a plan for the general training of asylum attendants. "If our asylums," he said, "are to be more like hospitals, our attendants, like hospital nurses, must be specially trained." He proposed:

1. That the superintendents of the asylums of Scotland should enter into a combination, for two years, to furnish

training to all their attendants;

2. That, upon passing an examination, the attendants should receive certificates of first, second, or third class;

3. That a register of certificated attendants should be

kept and printed for circulation among the asylums.

This plan was discussed by the Association, and a committee was appointed to consider the subject, and to prepare a manual of instruction for asylum attendants. All superintendents who undertake systematic training of their attendants were invited to communicate the results to this committee. Subsequently Dr. Turnbull, of the Fife and Kinross Asylum, established a system of lectures and tutorial teaching for his attendants, and assured the committee of his satisfaction with the results attained. This committee has since then reported, advising further experiments in instruction, and has issued the manual.

In this country, the need of training for the attendants of the insane is beginning to be generally recognized. In the report already quoted of the Pennsylvania Commission of 1882, the establishment of a training-school for attendants in each of the State asylums is strongly recommended. Upon

^{*} Published in the Quarterly Journal of Mental Science for January, 1884. The debate which followed was reported in the same journal, April, 1884.

the passage of the New York State Civil Service Act, the Civil Service Commission appointed a board of examiners for the applicants for service as attendants in the State asylums, by whom such applicants are now examined; but the Commission did little more than formulate the customs of the asylums themselves.* Toward the close of 1883, a training-school for attendants was established in the asylum at Utica, with systematic teaching by lectures, from the members of the medical staff, in respect to the duties of attendants, "and also on matters of hygiene, food, clothing, baths, etc.; with such instruction in anatomy and physiology as may be useful in their calling and in preserving health."

In the Buffalo State Asylum the attendants now receive weekly lectures from the assistant physicians, attendance upon which is compulsory. These lectures are said to embody substantially the same course as in the ordinary training-schools for nurses, with the addition of special instruction in the care of the insane.

The superintendents of several other asylums have adopted various expedients for the improvement of the attendants. In the New York City Asylum, on Ward's Island, a number of the male attendants are skilled mechanics, who are employed to teach the patients their respective trades. In the Kings County Asylum, the superintendent assigns all who enter the service of the asylum at first to the reception wards, where they are immediately under the eye of the physicians and come in contact with a great variety of cases: as they learn their duties, they are promoted to wards where they have more responsibility.

But it is not only in asylums that the insane need trained care. Many physicians testify that, for lack of skilful attendants, patients who might be cared for and cured at home are sent to asylums, although this course sometimes aggravates and confirms their malady. Dr. C. H. Nichols, Super-

^{*} See the Eleventh Annual Report of the State Commissioner in Lunacy for 1883, p. 18 et seq.

intendent of the Bloomingdale Asylum, in his last annual report says: "There is a great want of available skill in the personal care of the insane during the periods that they are from necessity or choice treated at their homes, and it has appeared to me that the most practicable way in which that want could be supplied would be to add three or six months in proper institutions for the insane to the curriculum of the training-schools for nurses. Nurses with such an addition to the training that is now usual, would be qualified to nurse any case of sickness, whether surgical, medical, or mental, in which their services might be demanded." He then offers to receive the graduated nurses of the New York City Hospital for three or six months' training at Bloomingdale—an arrangement which would be, as he thinks, mutually advantageous to the nurses and to the asylum.

From all the foregoing facts it appears that the institution of training-schools for attendants upon the insane is the most urgent need of that unhappy class. Those who enter such a school should be previously trained as sick nurses, and should be, moreover, carefully selected with regard to their special fitness for the work.

But there are as yet no training-schools for men nurses, and therefore it will be said that such a scheme as this would leave untouched the difficulty of obtaining good male attendants. Anything, however, which raised the standard of care in an asylum would affect the whole body of attendants—a little leaven leavens the whole lump. In many of the English and Scotch asylums a certain proportion of women are employed as attendants in male wards, and in some of them the male infirmaries are nursed exclusively by women, with excellent results. A Massachusetts physician states his belief, from his experience in asylums, "That in the men's wards the greatest improvement is to come from the employment of women as nurses." * Elsewhere

^{*} Bost n Medical and Surgical Journal, July, 1883.

the plan has been tried and given up as dangerous. Possibly its feasibility in any particular institution will depend upon the special circumstances of that institution; but it may be observed that the more highly trained and efficient the nurse, the less will be the danger.

But could a sufficient number of highly qualified women be found to undertake a life so hard and offering so few inducements? Doubtless the candidates at first would be few, but as good results showed themselves the number would grow. As it has been with trained sick nurses, so with trained attendants for lunatics; the demand for private cases would probably increase with the supply, and the high wages paid for such service would draw women of ability into the asylums for training. And the presence of such women would do away with the more repulsive features of asylum life, and send through its dreary stagnation a current of hope and cheer. With such subordinates, superintendents could venture upon experiments in treatment which they dare not intrust to clumsy or indifferent hands.

As supervisors, as matrons, as heads of infirmaries, the graduates of such a school would be entitled to much higher salaries than are at present paid in asylums, but it would be a false economy to refuse an expenditure which would add so much to the efficiency of these institutions. Can anyone doubt that the insane would be benefited by constant intercourse with actively intelligent minds, with faculties steadily bent upon their improvement; that recovery would be more frequent and more rapid, and that there would be fewer of the hopeless chronic cases, who now accumulate in alarming numbers, and must be provided for? Asylums are very costly things; if by heightening the curative force of one asylum we can obviate the necessity of building another, considerations of economy no less than of humanity urge us to do so.



APPENDIX.

ON THE QUESTION OF GETTING, TRAINING, AND RETAINING THE SERVICES OF GOOD ASYLUM ATTENDANTS.

By T. S. CLOUSTON, M.D.,

PHYSICIAN-SUPERINTENDENT, ROYAL EDINBURGH ASYLUM.

(Read at the Annual Meeting of the Medico-Psychological Society of Great Britain, July 28, 1876, and published in the *Quarterly Journal of Mental Science*, October, 1876. Reprinted by permission of the author.*)

THERE were in Great Britain in the beginning of 1875 about seventy-two thousand insane persons registered and under control. For the care and treatment of these there are at least six thousand paid officials, whose sole duty it is to act as their attendants and nurses. This is reckoning them as one to twelve patients over all, the usual proportion in county asylums; the number less than this in poor-houses being made up for by the extra number employed in the care of the wealthier classes.

There is no available source from which I can ascertain precisely the changes that take place among attendants in Great Britain, but in the thirteenth report of the Scotch Commissioners in Lunacy (for 1871) a table is given showing the changes that had taken place among attendants in Scotch institutions for that year. Including voluntary resignations and dismissals, they amounted to 281, out of a total of about 500 employed, that is, the length of the service of each attendant was on an average less than two years. I think it will accord with the experience of most asylum medical officers, that attendants don't stay on any better now than they did five years ago, and it is my own opinion, formed after an experience in both countries, that attendants remain longer in the service in Scotch asylums than they do in English. It is a fair inference, therefore, that the

^{*} A few sentences, not applicable here, have been omitted: the omissions being marked by ellipses.

changes among attendants in Great Britain now are no less frequent than they were in Scotland in the year 1870; and, therefore, it may be safely assumed that there were three thousand four hundred changes among them last year, and that the average period of their services is less than two years.

I am perfectly aware, of course, that the duration of the services of many attendants is much less than a year, thus running up the average number of changes, and that there is, in all asylums, a stable nucleus in the staff of attendants, as well as a floating, ever-shifting plasma.

I have no means of verifying the fact by statistics, but the universal testimony of asylum superintendents is that of the new entrants into the service, by far the majority have never been in asylums before, and are, therefore, totally inexperienced in the management of the insane. The same testimony is equally strong and almost as unanimous, that this raw material, out of which they endeavor to make attendants on the insane, is most difficult to get good at present.

It requires no words of mine to show that this state of matters is most unsatisfactory to those who have the management of asylums, and is most detrimental to the insane: interfering with the comfort and happiness of some of them, prolonging the malady of others, preventing the recovery of a number, and causing risk to the lives of not a few. I should not much exaggerate if I said that this attendant question is at present the question of questions to many of us at the head of asylums. . . . Which of us would not feel a burden lifted off us, and sleep more soundly at night, if we could think that our patients were all under the care of experienced, intelligent, and trustworthy attendants? Would not the absence of that suspicion with which we instinctively go round our wards, sweeten our lives and liberate more energy and sympathy in doing our daily medical work? If we could see in each of our attendants a well-principled person, intelligent enough to understand the reason of his rules and the unreason of his patients; with sense of duty enough to make him do his work as well when we are away as when we are looking on; with vigor of mind enough to compel the respect of his fellow-attendants and his patients; with tact and temper enough to get on smoothly and have his own way with them too; with kindness of heart enough to put himself in the position of his patients at times; with self-control enough never to do more than

blow some of them up, when they needed it; with observation enough to see and report the changes in their mental and bodily state to the doctor; with adaptability enough to cheer up the depressed and curb the excited in the same breath; and finally, with physique and health strong, with a gracious presence, and a pleasant, sympathetic manner—if each of us could see all this embodied in each of his attendants, should we not feel as if it were an easy thing to manage an asylum, and not so sad a thing after all to be insane? As I try to realize the ideal asylum with such attendants, it seems indeed one of the highest embodiments of human philanthropy. Alas! I fear such an institution is far removed from those over which we preside.

But to return to real life. Are six thousand beings such as I have described to be got for love or money in Great Britain? I question it; but, what is the same to us, they are certainly not to be got to enter asylum service as attendants. We have, therefore, to look for a somewhat lower ideal; but if even this is too high, I am quite sure most of us have one far too low.

One or two facts familiar to all of us are worthy of notice in passing. Which of us has not found a very uneducated person with no advantages of up-bringing—the son or daughter of a poor cottager—to turn out an excellent attendant? Who has not found a smart, educated, intelligent, bright-looking young man perfectly useless in the wards? Who has not had experience of a well-principled person of the best character, moral and religious, turning out a dead failure? My experience cannot be quite peculiar in sometimes finding a well-brought-up, educated girl failing entirely with a lady, when one who entered the service as a scullery maid succeeds to perfection. Do we not find that a woman entering the service at forty will sometimes make a first-rate attendant, and a girl of sixteen do equally well with the same case? Have we not all every-day experience of the fact that a man brought up in the country will sometimes be a failure, while one from a town will do well? Is it not the case that at times we find a man or woman without any sort of experience whatever, a first-rate attendant in a month? Such facts show most strongly that persons of different stations, characters, educations, experiences, and ages will all make good attendants, and that, therefore, our field of choice is not a limited one. This is a very important and very satisfactory fact to us all in the outset of our search for our six thousand. But they

show as clearly that some sort of natural aptitude for the work is necessary in all cases, without which nothing else will do.

Are there any special motives that influence our attendants to enter asylum service? I think there are none except those that influence people in seeking situations elsewhere. I fear one of the most common ideas in their minds is that the work is not hard. In the course of thirteen years' experience as an asylum superintendent. I have had just one person assign as a reason (and I constantly ask the question) that she wished to do good to her fellow-creatures; and the circumstance was so unprecedented that I regarded her with much suspicion, and cross-questioned her most sharply to detect any lurking hypocrisy. I am glad to say she turned out and is still one of the best nurses for the sick insane I ever had. Can we expect to get six thousand persons to act as attendants from such (so-called) higher motives? I think not. We may give up the notion as chimerical at once. Indeed, most of us could not fail to have a sense of much incongruity in our presiding over institutions with such a staff. I know of few members of this Association who took to asylum life from "higher motives" alone, however, much these motives may influence the way our work is done. We cannot expect from others what did not influence ourselves.

It would seem a mere truism that we ought to get as well-educated and as well-brought-up men and women as we can; and yet your experience will be greatly different from mine if it has not led you to be very guarded in employing any man who, with a good education and better position in life, comes to you seeking an engagement as an attendant. As things are at present, such men are generally failures elsewhere before they come to us. In the case of females, we do, especially for private patients, get good attendants from the class of teachers, farmers' daughters, and governesses, but by no means invariably so. I have asked many head-attendants and matrons, and the almost constant answer I received was that the best raw material they got was, in the case of men, from the class of farm servants fresh from the country; and in the case of women, from the class of domestic servants of the better sort. Is this really the best raw material for our attendants, or is our standard at present too low? I am decidedly of opinion that, at least for our pauper asylums, this is the best material. Far better get the best of such classes than the worst of a higher grade. But do we get the best of those classes? I fear not. There is no doubt that a lady's maid or a housemaid of respectability would look on it as a great come-down to take service as an attendant. I fear we often get the sort of men who are too idle to work hard, and the sort of women who go as servants to hotels and lodging-houses. This is undoubtedly a most serious matter, and all of us who have the welfare of our patients at heart must deplore the fact and strive hard to raise the standard. The attendant of the future, if he is to excel that of the present, must have good material in him and must be a good specimen of his class. To get such a person to come to us, it is quite certain that in the first place we must offer rather better rates of pay than can be readily got elsewhere. Our work is not attractive. Will this alone tempt him to come to us, and when there keep him? The experience of many asylums where the pay is above the wages of the district, shows that it will not keep him. It is not a mere money question. All of us have had good attendants leave us when we have offered an addition of five pounds to their wages to stay.

What sort of first experience in an asylum is apt to make the best attendants? I have generally found it to be one of this kind: A young man, after being spoken to by me very seriously as to the responsible nature of his duties, etc., is handed a copy of his rules. told to read them through carefully at once, and is sent to be junior attendant in the admission ward, where there is a good old charge attendant, who takes an interest in him, and whom he sees obviously taking an interest in the individual patients. He sees day by day new patients arriving and being examined by the doctor. He hears the charge attendant questioned about their state and symptoms, and soon he himself is asked by the medical officer as to the symptoms of the patients he has charge of. He soon comes to look on patients in some degree from the doctor's point of view, takes an interest in them from this higher and professional point, and turns out not a mere machine for keeping order and cleanliness in the ward and carrying out the general arrangements of the institution, but a true guardian and friend of his individual patients. Now, why has this man turned out well? I think the reason is that he has been subjected to the right training when he first entered on his duties. He has been educated to look on his patients and his work from a professional or special point of view, just as a doctor is educated to look on his work. This is the only way, I believe, of getting over the disagreeable things in any kind of work. But even

in the case I have taken, how unsystematic and haphazard is the training! How many new attendants are pitchforked into wards full of dements, where they are never asked a question by the doctor about the individual patients, where they come under the influence of bad attendants only experienced in bad ways! How can we expect them to turn out good attendants? Is it not in the experience of us all that a man whom we have accidentally spoken more to and ask questions of, from his having an interesting case under his charge, has from that time come out in a new light, and developed qualities he never showed before? A new way of looking at his patients has been roused in him, and a new interest in his work begotten.

Now, if these are facts, can we not devise and elaborate a systematic professional training for attendants in all our large asylums? Subjecting each one to a regular education, not only as to the routine of his ward duties, but much more in regard to the forms of the different kinds of insanity, their nature, and their appropriate management and treatment, could we not in that way produce, in some degree, our own point of view of insanity and insane patients in the case of the attendants? Who that has seen a well-trained nurse manage a fever patient, can fail to see the importance of this intelligent, professional mode of looking at a patient and his disease? This training would weed out the persons without the special tact and adaptability for the work, more or less of which must be innate before any one can make a good attendant.

But coming more to details. Could we not have, in every large asylum, one ward in which all new attendants should be trained? Could we not have in this ward a person of intelligence and experience to have charge of it, and give the novice instruction in the routine of his ward work? Could we not have one of the medical officers spend a special time each day in instructing them as to the mental peculiarities, habits, and diseases of the different kinds of cases, draughting in succession into the training ward for this purpose a typical suicidal melancholic, an acutely excited case, a general paralytic in his different stages, an epileptic, a low dement, a masturbator, a delusional case without excitement, etc., giving the novice charge of each of these in succession, making him walk with him, work with him, sleep with him, and eat with him; the doctor and chief attendant examining the novice and teaching him every day as to the things to be known and done, making him feel and

realize that here was a human being with a certain disease, which it was his business to look into and know how to manage? Could he not go with his patients to see their relatives when they came to the asylum, and find out why and how this disease arose? Could not one of the medical officers, once a week during the winter evenings, give a lecture to all the staff on the brain and mind, their functions, their diseases, and their treatment? Can any one doubt that such a training for an attendant would be better than the present mode? Why, then, should we not attempt it on a large scale? Surely our counties are rich enough to afford the extra expense. The comfort and assistance of having reliable men and women about us would far more than repay all the trouble it would give us.

Supervision of our attendants in our wards is no doubt most important; but I believe that if we offered enough pay, to begin with, to draw good raw material to us, and then moulded it in this way to our own views, there would be less necessity for watching our wards with the feeling of detectives.

- . . . But, having got our attendant and trained him, how can we keep him? My own impression is that we must carry out, in some degree, the following things before we shall get our attendants to stay in our asylums, doing their irksome and disagreeable duties for many years running:
- I. Provide a rising scale of pay up to a really good amount: certainly not less than £50 a year as the maximum in ten years.
- 2. Give pensions to all those who become sick or who serve long, at about twice the relative proportion to pay, as in the Civil Service.
- 3. Make provision for changing attendants from one asylum to another, one institution getting the benefit of the surplus of another district; the pay and pensions counting as if no such change had been made. I am certain we lose for our patients the services of very valuable trained attendants, whose desire for a little change, or temporary ill-health, or misunderstandings with fellow-attendants or officials make them leave us, but who would be delighted to go to another asylum taking the same rank.
- 4. Develop and encourage an *esprit de corps* among attendants as a class, making them proud of their profession as we are of ours. I should like to see them get diplomas from the asylums where they were trained, and that they should get up an association of attendants extending all over the kingdom.
 - 5. Provide facilities in the matter of houses, suitable times of

leave, etc., and for the marriage of at least one-half of our male attendants.

- 6. Encourage any kind of promotion to head-attendants' positions, to good places in charge of private patients or in private asylums, etc.
- 7. Encourage by some special means provident habits. Next to good principles, I have always found saving money the best thing in an attendant. Such a man is not a rolling stone.
- 8. Make their lives as pleasant as possible by good accommodation, days off duty, annual holidays, social gatherings, means of amusement and instruction, and above all, reasonable facilities for satisfying the social cravings of human nature.
- 9. Bring systematically and directly to bear upon them the elevating influence of the better educated officials, such as the medical officers, chaplains, matrons, etc. I am certain that the chaplain should be a more valuable official in an asylum than he commonly is. How many asylum chaplains preach to the attendants, now and then speaking to them in a direct and real way as to their special temptations, and setting before them a high idea of duty?













